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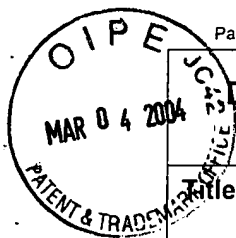
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DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN APPLICATION DATA SHEET (37 CFR 1.76)

Title of Invention	EFFECT OF VITAMIN A GEL ON PARANASAL SINUS MUCOSAL REGENERATION
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As the below named inventor(s), I/we declare that:

This declaration is directed to:

- ☐ The attached application, or
☒ Application No. 10/658,962, filed on September 8, 2003,
☐ as amended on _____ (if applicable);

I/we believe that I/we am/are the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought;

I/we have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above;

I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56, including material information which became available between the filing date of the prior application and the National or PCT International filing date of the continuation-in-part application, if applicable; and

All statements made herein of my/our own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon.

FULL NAME OF INVENTOR(S)

Inventor one: Mendy S. Maccabee Citizen of: US

Signature: _____ Date: _____

Inventor two: Peter H. Hwang Citizen of: US

Signature: *Peter H. Hwang* Date: 1/14/04

Inventor three: Dennis R. Trune Citizen of: US

Signature: *Dennis R. Trune* Date: 1-14-04

Inventor four: _____ Citizen of: _____

Signature: _____ Date: _____

☐ Additional inventors are being named on _____ additional form(s) attached hereto.

Burden Hour Statement: This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is used by the public to file (and the PTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This form is estimated to take 1 minute to complete. This time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Ref 49331-102

3/58/01A (05-03)

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DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN APPLICATION DATA SHEET (37 CFR 1.76)

Title of Invention	EFFECT OF VITAMIN A GEL ON PARANASAL SINUS MUCOSAL REGENERATION		
<p>As the below named inventor(s), I/we declare that:</p> <p>This declaration is directed to:</p> <p><input type="checkbox"/> The attached application, or</p> <p><input checked="" type="checkbox"/> Application No. <u>10/558,992</u>, filed on <u>September 8, 2003</u>.</p> <p><input type="checkbox"/> as amended on _____ (if applicable).</p> <p>I/we believe that I/we am/are the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought;</p> <p>I/we have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above;</p> <p>I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56, including material information which became available between the filing date of the prior application and the National or PCT International filing date of the continuation-in-part application, if applicable; and</p> <p>All statements made herein of my/our own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon.</p>			
FULL NAME OF INVENTOR(S)			
Inventor one:	<u>Mendy S. Maccabee</u>	Citizen of:	<u>US</u>
Signature:	<u>M. Maccabee MD</u>	Date:	<u>2/27/04 March 1, 2004</u>
Inventor two:	<u>Peter H. Hwang</u>	Citizen of:	<u>US</u>
Signature:	<u>P. H. Hwang</u>	Date:	<u>1/14/04</u>
Inventor three:	<u>Dennis R. Truno</u>	Citizen of:	<u>US</u>
Signature:	<u>Dennis R. Truno</u>	Date:	<u>1-14-04</u>
Inventor four:		Citizen of:	
Signature:		Date:	
<input type="checkbox"/> Additional inventors are being named on _____ additional form(s) attached hereto.			

STANDARD FORM NO. 100-102
7-5896



STATEMENT UNDER 37 CFR 3.73(b)

Applicant/Patent Owner: Oregon Health & Science University

Application No./Patent No.: 10/658,962 Filed/Issue Date: September 8, 2003

Entitled: **EFFECT OF VITAMIN A GEL ON PARANASAL SINUS MUCOSAL REGENERATION**

Oregon Health & Science University
(Name of Assignee)

a Public corporation
(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☒ the assignee of the entire right, title, and interest; or
2. ☐ the assignee of an undivided part interest

In the patent application/patent identified above by virtue of either:

A. ☐ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel [____], Frame [____], or for which a copy thereof is attached.

OR

B. ☒ A chain of title from the inventor(s) of the patent application/patent identified above, to the current assignee as shown below:

1. From: [____] To: [____]

The document was recorded in the United States Patent and Trademark Office at Reel [____], Frame [____], or for which a copy thereof is attached.

2. From: [____] To: [____]

The document was recorded in the United States Patent and Trademark Office at Reel [____], Frame [____], or for which a copy thereof is attached.

3. From: [____] To: [____]

The document was recorded in the United States Patent and Trademark Office at Reel [____], Frame [____], or for which a copy thereof is attached.

☐ Additional documents in the chain of title are listed on a supplemental sheet.

☒ Copies of assignments or other documents in the chain of title are attached.

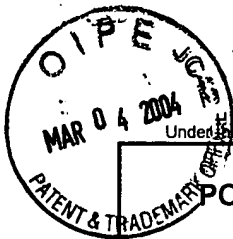
[NOTE:] A separate copy (i.e., the original assignment document or a true copy of the original document) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.8]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

1/7/04
Date

Larry M. Spansmeier
Typed or printed name
Larry M. Spansmeier
Signature
Interim Director
Title

This collection of information is required by 37 CFR 3.73(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

**POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	10/658,962
Filing Date	September 8, 2003
First Named Inventor	Maccabee
Title	EFFECT OF VITAMIN A GEL ON PARANASAL SINUS MUCOSAL REGENERATION
Group Art Unit	
Examiner Name	
Attorney Docket Number	49321-102

I hereby appoint:

☒ Practitioners at Customer Number:

22504

OR

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

☒ The above-mentioned Customer Number.

OR

☐ The address associated with Customer Number:

OR

<input type="checkbox"/> Firm or Individual Name	Barry L. Davison, Ph.D., J.D.				
Address					
Address					
City		State		ZIP	
Country					
Telephone	206-628-7621	Fax	206-628-7699		

I am the:

☐ Applicant/Inventor.☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).**SIGNATURE of Applicant or Assignee of Record**

Name	Larry M. Simonsmeier		
Signature	Larry M. Simonsmeier		
Date	11/7/04	Telephone	

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ *Total of ____ forms are submitted.

This collection of information is required by 37 CFR 1.131 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.